

IN THE UNITED STATES DISTRICT COURT  
FOR THE CENTRAL DISTRICT OF CALIFORNIA  
EASTERN DIVISION

CASE NUMBER:

**CV17-3040-00W (FFMx)**

**WALTER LEE WILLIAMS,**  
Plaintiff,

**vs.**

**UNITED STATES OF AMERICA,**  
et al.,  
Defendants.

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**VERIFIED COMPLAINT  
VOLUME 1**  
**EXHIBIT 1 - EXHIBIT 14**

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**WALTER LEE WILLIAMS**  
Inmate No. - 65562-112  
FCI - Englewood  
9595 West Quincy Avenue  
Littleton, Colorado 80123  
303-763-4300  
**PRO SE REPRESENTATION**

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EXHIBIT 1

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Title 18, United States Code,  
Section 249

§ 249. Hate crime acts

**(a) In general.**

(1) Offenses involving actual or perceived race, color, religion, or national origin. Whoever, whether or not acting under color of law, willfully causes bodily injury to any person or, through the use of fire, a firearm, a dangerous weapon, or an explosive or incendiary device, attempts to cause bodily injury to any person, because of the actual or perceived race, color, religion, or national origin of any person--

- (A) shall be imprisoned not more than 10 years, fined in accordance with this title, or both; and
- (B) shall be imprisoned for any term of years or for life, fined in accordance with this title, or both, if--
  - (i) death results from the offense; or
  - (ii) the offense includes kidnapping or an attempt to kidnap, aggravated sexual abuse or an attempt to commit aggravated sexual abuse, or an attempt to kill.

(2) Offenses involving actual or perceived religion, national origin, gender, sexual orientation, gender identity, or disability.

- (A) In general. Whoever, whether or not acting under color of law, in any circumstance described in subparagraph (B) or paragraph (3), willfully causes bodily injury to any person or, through the use of fire, a firearm, a dangerous weapon, or an explosive or incendiary device, attempts to cause bodily injury to any person, because of the actual or perceived religion, national origin, gender, sexual orientation, gender identity, or disability of any person--
  - (i) shall be imprisoned not more than 10 years, fined in accordance with this title, or both; and
  - (ii) shall be imprisoned for any term of years or for life, fined in accordance with this title, or both, if--
    - (I) death results from the offense; or
    - (II) the offense includes kidnapping or an attempt to kidnap, aggravated sexual abuse or an attempt to commit aggravated sexual abuse, or an attempt to kill.

(B) Circumstances described. For purposes of subparagraph (A), the circumstances described in this subparagraph are that--

- (i) the conduct described in subparagraph (A) occurs during the course of, or as the result of, the travel of the defendant or the victim--
  - (I) across a State line or national border; or
  - (II) using a channel, facility, or instrumentality of interstate or foreign commerce;
- (ii) the defendant uses a channel, facility, or instrumentality of interstate or foreign commerce in connection with the conduct described in subparagraph (A);

- (iii) in connection with the conduct described in subparagraph (A), the defendant employs a firearm, dangerous weapon, explosive or incendiary device, or other weapon that has traveled in interstate or foreign commerce; or
- (iv) the conduct described in subparagraph (A)--
  - (I) interferes with commercial or other economic activity in which the victim is engaged at the time of the conduct; or
  - (II) otherwise affects interstate or foreign commerce.

(3) Offenses occurring in the special maritime or territorial jurisdiction of the United States. Whoever, within the special maritime or territorial jurisdiction of the United States, engages in conduct described in paragraph (1) or in paragraph (2)(A) (without regard to whether that conduct occurred in a circumstance described in paragraph (2)(B)) shall be subject to the same penalties as prescribed in those paragraphs.

(4) Guidelines. All prosecutions conducted by the United States under this section shall be undertaken pursuant to guidelines issued by the Attorney General, or the designee of the Attorney General, to be included in the United States Attorneys' Manual that shall establish neutral and objective criteria for determining whether a crime was committed because of the actual or perceived status of any person.

**(b) Certification requirement.**

- (1) In general. No prosecution of any offense described in this subsection may be undertaken by the United States, except under the certification in writing of the Attorney General, or a designee, that--
  - (A) the State does not have jurisdiction;
  - (B) the State has requested that the Federal Government assume jurisdiction;
  - (C) the verdict or sentence obtained pursuant to State charges left demonstratively unvindicated the Federal interest in eradicating bias-motivated violence; or
  - (D) a prosecution by the United States is in the public interest and necessary to secure substantial justice.
- (2) Rule of construction. Nothing in this subsection shall be construed to limit the authority of Federal officers, or a Federal grand jury, to investigate possible violations of this section.

**(c) Definitions.** In this section--

- (1) the term "bodily injury" has the meaning given such term in section 1365(h)(4) of this title [18 USCS § 1365(h)(4)], but does not include solely emotional or psychological harm to the victim;
- (2) the term "explosive or incendiary device" has the meaning given such term in section 232 of this title [18 USCS § 232];
- (3) the term "firearm" has the meaning given such term in section 921(a) of this title [18 USCS § 921(a)];

- (4) the term "gender identity" means actual or perceived gender-related characteristics; and
- (5) the term "State" includes the District of Columbia, Puerto Rico, and any other territory or possession of the United States.

**(d) Statute of limitations.**

- (1) Offenses not resulting in death. Except as provided in paragraph (2), no person shall be prosecuted, tried, or punished for any offense under this section unless the indictment for such offense is found, or the information for such offense is instituted, not later than 7 years after the date on which the offense was committed.
- (2) Death resulting offenses. An indictment or information alleging that an offense under this section resulted in death may be found or instituted at any time without limitation.

(Added and amended Oct. 28, 2009, P. L. 111-84, Div E, §§ 4707(a), 4711, 123 Stat. 2838, 2842.)

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EXHIBIT 2

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AFFIDAVIT: "No Reply to Appeal Filed  
Central Office in Regards to January  
28, 2014, Injury"

**WALTER LEE WILLIAMS**  
Inmate No. - 65562-112  
FCI - Englewood  
9595 West Quincy Avenue  
Littleton, Colorado 80123  
**PRO SE REPRESENTATION**

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**AFFIDAVIT: NO REPLY TO APPEAL FILED  
WITH THE CENTRAL OFFICE REGARDING  
THE JANUARY 28, 2014, INJURY**

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My name is **WALTER LEE WILLIAMS**, I am the Plaintiff in this cause of action, and I am an inmate in Federal custody at FCI - Englewood, Littleton, Colorado. I certify that I have personal knowledge of the facts and information averred to herein. Under penalty of perjury, and to the best of my ability, belief, and knowledge, I do hereby depose, aver, and state the following as true and correct:

1. That on December 19, 2014, an Informal Administrative Remedy Request (BP-8) was filed.
2. That on December 29, 2014, a Request For Administrative Remedy (BP-9) was filed.
3. That on January 14, 2015, a Regional Administrative Appeal (BP-10) was filed.
4. That on August 4, 2015, a Central Office Administrative Appeal (BP-11) was filed.
5. That the deadline for Central Office Response to my BP-11 Appeal was on or about September 15, 2015, over thirty (30) days after the submission date of August 4, 2015.
6. That as of the date of this Affidavit being executed, I have not yet

received acknowledgement of, response to, or answer to my BP-11; thus, it is deemed as denied.

7. That this Affidavit is in support of, and attached to, my Verified Complaint.

8. Pursuant to 28 U.S.C. §1746 and 18 U.S.C. §1621, I **WALTER LEE WILLIAMS**, the undersigned Plaintiff in the above referenced action, do hereby aver, under penalty of perjury, that the information contained herein is true and correct to the best of my ability, belief, and knowledge.

**FURTHER AFFAINT SAYETH NAUGHT.**

EXECUTED ON THIS 11 day of April, 2017, at FCI - Englewood, Littleton, Colorado.



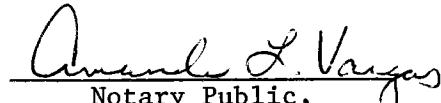
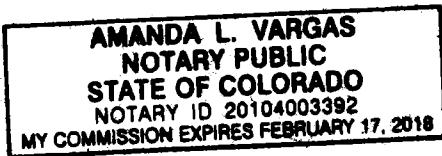
Walter L. Williams  
Inmate No. - 65562-112  
FCI - Englewood  
9595 West Quincy Avenue  
Littleton, Colorado 80123  
303-763-4300

**PRO SE REPRESENTATION**

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SUBSCRIBED AND SWORN TO BEFORE ME on this 11<sup>th</sup> day of April, 2017, at FCI - Englewood, Littleton, Colorado.

(SEAL)

  
Amanda L. Vargas  
Notary Public,  
State of Colorado

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EXHIBIT 3

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AFFIDAVIT: "No Reply to Appeal Filed with  
Central Office in Regards to FTCA  
Administrative Claim No. TRT-WXR-2015-01608"

**WALTER LEE WILLIAMS**  
Inmate No. - 65562-112  
FCI - Englewood  
9595 West Quincy Avenue  
Littleton, Colorado 80123  
**PRO SE REPRESENTATION**

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**AFFIDAVIT: NO REPLY TO APPEAL FILED WITH THE  
CENTRAL OFFICE REGARDING FTCA ADMINISTRATIVE  
CLAIM NO. TRT-WXR-2015-01608**

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My name is **WALTER LEE WILLIAMS**, I am the Plaintiff in this cause of action, and I am an inmate in Federal custody at FCI - Englewood, Littleton, Colorado. I certify that I have personal knowledge of the facts and information averred to herein. Under penalty of perjury, and to the best of my ability, belief, and knowledge, I do hereby depose, aver, and state the following as true and correct:

1. That on December 29, 2014, a Claim for Damage Injury, or Death (Standard Form 95 - Tort Claim) was filed.
2. That on January 6, 2015, the Federal Bureau of Prisons acknowledged receipt of my Tort Claim and assigned the claim to the Consolidated Legal Center located at Metropolitan Detention Center, Los Angles, California.
3. That on June 25, 2015, my Tort Claim was denied by legal staff at the same facility at which I was injured at.
4. That on July 7, 2015, the letter of denial was given to me by my case manager.
5. That on August 6, 2015, a Central Office Administrative Appeal (BP-11) was filed.
6. That the deadline for Central Office response to my BP-11 Appeal was

on or about September 15, 2015, over thirty (30) days after the submission date of August 6, 2015.

7. That as of the date this Affidavit was executed, I have not yet received acknowledgement of, response to, or answer to my BP-11; thus, it is deemed as denied.

8. That this Affidavit is in support of, and attached to, my Verified Complaint.

9. Pursuant to 28 U.S.C. §1746 and 18 U.S.C. §1621, I, **WALTER LEE WILLIAMS**, the undersigned Plaintiff in the above referenced action, do hereby aver, under penalty of perjury, that the information contained herein is true and correct to the best of my ability, belief, and knowledge.

**FURTHER AFFAINT SAYETH NAUGHT.**

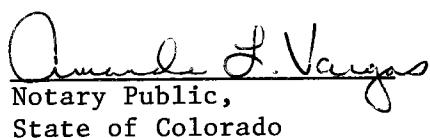
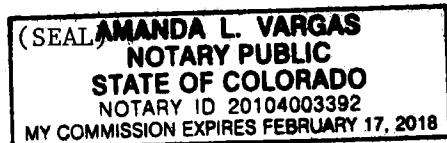
EXECUTED ON THIS 11 day of April, 2017, at FCI - Englewood, Littleton, Colorado.



Walter L. Williams  
Inmate No. - 65562-112  
FCI - Englewood  
9595 West Quincy Avenue  
Littleton, Colorado 80123  
303-763-4300  
PRO SE REPRESENTATION

---

SUBSCRIBED AND SWORN TO BEFORE ME on this 11<sup>th</sup> day of April, 2017, at FCI - Englewood, Littleton, Colorado.



Amanda L. Vargas  
Notary Public,  
State of Colorado

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\*\*\* SEALED DOCUMENT \*\*\*

EXHIBIT 4

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\*\*\* SEALED DOCUMENT \*\*\*

BOP Clinical Encounter Establishing Date  
Plaintiff was Attacked by Kevir

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EXHIBIT 5

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Plaintiff's AFFIDAVIT Detailing Events  
Leading up to the Brutal Beating  
Plaintiff Received

TRULINCS 65562112 - WILLIAMS, WALTER LEE - Unit: LOS-E-S

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FROM: 65562112

TO: Burns, Marshall; Dobbs, William; Fernandez, Manuel; Gits, Christina; Williams, Opal C  
SUBJECT: affidavit

DATE: 04/07/2014 06:44:02 AM

This is my affidavit concerning my personal injury. I contend that the Los Angeles Metropolitan Detention Center has acted with gross negligence to me, in not adequately providing for my physical safety and protection from bodily injury, and from psychological trauma as I prepare for my court case. My constitutional right to a fair trial has been compromised because of this poor treatment.

My problems began in October, when a dangerous violent Muslim terrorist was housed in the same residential unit on 8 South. Captain Morales informed me that Omar Kevir made a written death threat against me. Omar did not like me because I am gay, and also because I am Buddhist. I know from my time living in Muslim countries that fundamentalist Muslims are often violent against Buddhists, and also against homosexuals. Captain Morales promised that the MDC staff would protect me. When Omar continued to harass me because of my sexuality and my religion, C.O. Mr. Ford interceded effectively. However, at other times when Mr. Ford was not present, Omar continued to harass and threaten me. I complained repeatedly to C.O. Mr. Young, psychologist Mr. Proctor, and other staff, saying that I feared Omar would cause me physical harm. In response to my complaints, an officer I did not know came into my cell and told me that staff could do nothing as long as Omar did not touch me. Other inmates saw that Omar's verbal attacks on me increased, but officers did nothing. I felt increasingly in danger.

Later in October, as I was talking to another inmate Jose Flores, Omar suddenly attacked me from behind. He hit me on the head and knocked me down. I did not hit him, but as I was lying on the floor I tried to ward off his blows to my head. When I did this, he hit and injured my wrist. I lost consciousness due to his repeated blows on my head. The next thing I knew I was being taken into the medical unit on a stretcher.

I learned later from other inmates who were there, that Omar was sent to SHU for one month, and when he returned to 8 South he bragged that he was glad he "fucked up the faggot." Additionally, I later learned from others that when Omar was beating me, C.O. Young walked very slowly across the unit from his office, and when he got to Omar he calmly asked: "Are you finished?" This slowness to respond, plus his comment, suggests that Mr. Young knew of Omar's planned attack. If this is the case, that was gross negligence on Mr. Young's part.

When I was taken to the medical unit, I was given an X-ray, but not a brain scan. After that, I was put into a cell in SHU and left there without any medical attention. I was not even given an ice pack for my bruised and swollen head and ear, even though both I and psychologist Dr. Shelton repeatedly requested one. While I was still dazed from the attack, I asked C.O. Estrada please not to further hurt my wrist when he placed handcuffs on me. He told me coldly to "shut up," and then he tightened the cuff on my wrist so tightly I yelled in pain. Then he jerked my wrists sharply, until I again cried out in pain. My wrist was hurting for several weeks after that.

For the next two days I was left alone in the SHU cell, without even any painkillers. I never received a visit from a doctor during almost twenty days I was in SHU. When I was transferred to 5 South, about \$40 of my personal property (ex. combination lock, typewriter ribbon, thermal shirt, etc.) was not returned to me. I felt as if I, who did nothing violent, suffered doubly. I wrote requests for reimbursement for this lost property, but nothing happened.

In the months after that attack, I started noticing that I was experiencing disorientation, imbalance, and forgetfulness. I also started losing my balance sometimes.

In December I was psychologically traumatized when another gay inmate was beaten, even more severely than I was. Having been recently beaten myself, I felt great disturbance at the lack of protection offered to gay inmates. The problem is that non-violent persons like me and my friend were housed in the same unit with violent felons. I asked that violent felons be moved to another floor, but only the perpetrators were moved. I did not feel safe.

The next thing that happened was when I slipped on some water on the floor, on Tuesday January 28, 2014. I was returning to my cell after 8 p.m. There was no "Wet Floor" sign, and I did not see the water puddle. Looking back on it, I think my fall was due to the imbalance I experienced after I was beaten. I fell hard on my left hip. As I lay on the floor, C.O. Mr. Torres called for medical assistance and kindly placed a pillow under my head to comfort me. I may have blacked out. I looked up to see nurse Mr. M. Saulibio ordering me gruffly: "Get up!" I could not move. He bent down and began pressing on my hip. The pain was so sharp I screamed in pain, and begged him to stop. He raised my leg and again I screamed in pain and begged him to stop. He told me that he had checked my femur and said, "Nothing is broken. It's only a sprain." I wanted to see a doctor, because I did not trust his diagnosis.

Mr. Saulibio and other officers moved me onto a stretcher. Once again, the pain was so severe I yelled loudly. Many inmates saw and heard all this. I heard inmate Joel Dreyer (who is a certified M.D.) yell to them, "It looks like his hip is broken. He should be taken to a hospital immediately." But the officers ignored him. After Mr. Saulibio kept moving my leg, I was fearful he would do even more damage if he kept on pressing on it. It felt like he was driving a large nail into my hip with a hammer. I feared he could kill me if this continued. I asked for a doctor, but someone said there was no doctor on duty.

The next thing they did was to take me to my cell. As two officers I do not recognize moved the stretcher upright at the door, they said, "I heard him refuse medical attention." I replied sharply, "I said no such thing. I want to see a doctor. That is ridiculous and untrue. I never refused to see a doctor." The two officers almost pushed me into the room, and told my cellmate

TRULINCS 65562112 - WILLIAMS, WALTER LEE - Unit: LOS-E-S

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Mike Peterson to take me to my bunk. Mike did so, as one of them said about me: "He's full of shit." Then they left and locked the cell door.

I lay in agony all night, with no medical attention. Every time I tried to move, the pain was so sharp I felt like I was going to die. I could not get up to go to the toilet, and was forced to lie in my own urine when I had to urinate. I did not sleep at all.

At 7 a.m. the next morning when the cell door was unlocked, I begged the C.O. to get a doctor. He saw me lying wet in my bunk, and asked if I peed on myself. I said I had no choice, since I could not move. He looked disgusted. He said he would call the doctor. I waited and waited. Again later, when he came to the cell, he said the doctor would be there soon. But more hours passed.

Several inmate friends came by to express their outrage at the way I was being left there by MDC staff. They told me they kept telling the staff that I should be taken to a hospital, but as more time passed no doctor arrived.

At lunchtime my cellmate Mike Peterson tried to bring a lunch tray up for me to eat. But, he told me, the C.O. said to him "If Williams wants to eat, he must come downstairs." The C.O. knew that I could not even get up to go to the toilet, much less walk down a flight of stairs. So I lay there with no food.

Finally, about 1:30 p.m. officer Steve Ford arrived with a stretcher. He and some other staff got me onto it, and carried me down the stairs, to the elevator, and to medical X-ray. The X-ray technician told me the x-ray showed that my upper femur was broken in three places. When I told him what Mr. Saulibio said, that nothing was broken, the technician gave a look of disgust and said, "There is no way anyone could tell that, without an X-ray." He said a nurse should not be moving my leg around, and should not be making a diagnosis. At last I understood why I was in so much pain, and that Mr. Saulibio was totally wrong.

After that, nurses Buckingham and Smith treated me kindly, and called an ambulance. About two hours later, I was taken on a gurney downstairs to an ambulance. There I saw Mr. Torres again, who was by that time back on duty for the next day. I thanked him for his concern the night before, but complained about Mr. Saulibio hurting me. Mr. Torres and others put me into the ambulance and I was taken to White Memorial Hospital. When I was admitted into the hospital emergency room, it was about 4:30 p.m. when I was seen by a doctor. It was about twenty hours from the time of my injury.

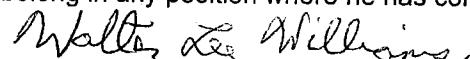
Dr. Gallino was the surgeon who led the surgery. In following weeks I received physical therapy under the direction of Dr. Abby. I remained at White Memorial Hospital for fifty days. The doctors told me that a steel rod was inserted inside my left femur, with three bolts to attach the three broken parts at the top of my femur. I received good medical care at White Memorial Hospital.

This injury has been the most painful experience of my life. I was brought back to MDC on March 19, 2014, and forced to wait several hours in a holding cell, with no pain medicine, before being wheeled in a wheelchair back to my old 5 South cell block. Numerous inmates expressed their concern, and their disgust at the long time I was left to languish in my cell before receiving medical care. Many are ready to testify as witnesses to the poor treatment I received. While I thank officers Torres, Ford, Smith, and Buckingham for their caring and humane assistance, the other staff -- especially nurse Saulibio -- exhibited gross negligence, to say the least.

When I checked into MDC, Mr. Saulibio was on duty. I asked him if he remembered telling me that "nothing was broken." Not only was he not apologetic, but he hautily told me: "I could do nothing, since you refused medical treatment." I replied: "That is a lie, and you know it." I asked him if he had my signature, refusing medical treatment. He said nothing. Then he gave me a "Medical Duty Status" form, which states that he gave me a left knee support brace. Mr. Saulibio gave me nothing. On the contrary, when I asked for my evening medicines for pain, he said, "The pharmacy is closed, and there is no way that anyone can get any medicines now."

About half an hour later, when I was back in 5 south, nurse Smith brought me medications. Once again, Mr. Saulibio had told me something which was not true. After all my negative experiences with him, I consider Mr. Saulibio to be a danger to my health and safety. I ask that I never have to deal with his cruel hostility and medical incompetence again. From my experience, I suspect he is a danger to others as well. Since my return to MDC, other inmates have told me he has been incompetent to them also. He is a disgrace to the medical profession, and does not belong in any position where he has contact with patients.

I testify this as my affidavit, signed this 8<sup>th</sup> day of April, 2014.



Walter Lee Williams

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EXHIBIT 6

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BOP Clinical Encounters and Radiology  
Report Confirming Broken Left Femur

**Bureau of Prisons  
Health Services  
Clinical Encounter**

Inmate Name: WILLIAMS, WALTER LEE  
Date of Birth: 11/03/1948  
Encounter Date: 01/28/2014 21:24

Sex: M Race: WHITE  
Provider: Saulibio, M. RN

Reg #: 65562-112  
Facility: LOS  
Unit: E06

Evaluation encounter performed at Health Services.

**SUBJECTIVE:**

**INJURY 1** Provider: Saulibio, M. RN

**Date of Injury:** 01/28/2014 20:19 **Date Reported for Treatment:** 01/28/2014 21:24

**Work Related:** No **Work Assignment:** UNASSG

**Pain Location:** Hip-Left

**Pain Scale:** 9

**Pain Qualities:** Throbbing

**Where Did Injury Happen (Be specific as to location):**

5S B RANGE

**Cause of Injury (Inmate's Statement of how injury occurred):**

SLIP AND FALL

**Symptoms (as reported by inmate):**

REPORTS SLIP AND FALL WITH CONTACT TO L HIP/THIGH ONLY. PAIN AND LIMITED ROM OF HIP. DENIES HEAD INJURY, LOC, DYSPNEA, CP, DISTAL PARESTHESIAS OR ROM ISSUES TO DISTAL LLE.

**OBJECTIVE:**

**Exam:**

**General**

**Appearance**

Yes: Alert and Oriented x 3, Appears in Pain

No: Appears in Distress

**Skin**

**General**

Yes: Skin Intact, Dry, Warmth

**Head**

**General**

Yes: Symmetry of Motor Function, Atraumatic/Normocephalic

**Peripheral Vascular**

**Legs**

Yes: Dorsalis Pedis Normal, Posterior Tibialis Normal, Capillary Refill Normal

**Musculoskeletal**

**Spine-Cervical**

Yes: Normal Exam, Full Range of Motion, Non-tender on Palpation, Normal Bony Landmarks, Symmetric

**Spine-Thoracic**

Yes: Normal Exam, Full Range of Motion, Non-tender on Palpation, Normal Bony Landmarks, Symmetric

**Spine-Lumbar**

Yes: Normal Exam, Full Range of Motion, Non-tender on Palpation, Normal Bony Landmarks, Symmetric

**Hip**

Yes: Normal Bony Landmarks, Neurovascular Intact, Tenderness, Decreased Range of Active Motion

No: Step Offs, Muscle Spasm, Joint Deformity, Malalignment, Muscle Rupture, Muscle Atrophy, Swelling,

Ecchymosis, Erythema, Warm to Touch L, Decreased Range of Passive Motion, Crepitus, Clicking,

Inmate Name: WILLIAMS, WALTER LEE  
Date of Birth: 11/03/1948  
Encounter Date: 01/28/2014 21:24

Sex: M Race: WHITE  
Provider: Saulibio, M. RN

Reg #: 65562-112  
Facility: LOS  
Unit: E06

**Exam:**

Popping, Locking, Trauma, Laceration(s), Abrasion(s), Contusion(s), Hematoma

**Femur**

Yes: Tenderness L, Normal Bony Landmarks L, Symmetric L, Neurovascular Intact L

No: Step Offs L, Muscle Spasm L, Deformity - Bony L, Deformity - Muscle L, Deformity - Soft Tissue L, Swelling L, Ecchymosis L, Erythema L, Crepitus L, Instability L, Laceration/s L, Trauma L, Abrasion/s L, Contusion/s L, Broken Skin L, Exposed Bone L

**Ankle/Foot/Toes**

Yes: Normal Exam L, Full Range of Motion L, Non-tender on Palpation L, Normal Bony Landmarks L, Symmetric L, Normal Active ROM L, Normal Passive ROM L, Neurovascular Intact L

**Back**

Yes: Normal Exam L, Non-tender on Palpation L, Normal Bony Landmarks L, Symmetric L, Neurovascular Intact L

No: Step Offs L, Muscle Spasm L, Joint Deformity L, Malalignment L, Swelling L, Tenderness L, Inflammation L, Ecchymosis L, Erythema L, Crepitus L, Clicking L, Popping L, Locking L, Trauma L

**ASSESSMENT:**

Pain - Other

**PLAN:**

**Disposition:**

Follow-up at Sick Call as Needed

Return Immediately if Condition Worsens

Return To Sick Call if Not Improved

**Other:**

DURING EXAMINATION ON THE UNIT INMATE ASKED TO RETURN TO HIS CELL. INMATE ASSISTED INTO STRIKER GURNEY AND BROUGHT TO HIS CELL. ONCE IN HIS BED FURTHER EXAMINATION WAS ATTEMPTED WITH INMATE REFUSING. REFUSALS WITNESSED BY SIS MAROQUIN.

PHONE CALL TO UNIT OFFICER @ 2135 - INMATE IN BED SLEEPING AT THIS TIME WITH NO FURTHER COMPLAINTS.

**Patient Education Topics:**

<u>Date Initiated</u>	<u>Format</u>	<u>Handout/Topic</u>	<u>Provider</u>	<u>Outcome</u>
01/28/2014	Counseling	Plan of Care	Saulibio, M.	Verbalizes Understanding
01/28/2014	Counseling	Access to Care	Saulibio, M.	Verbalizes Understanding

**Copay Required:** No

**Cosign Required:** Yes

**Telephone/Verbal Order:** No

Completed by Saulibio, M. RN on 01/28/2014 21:36

Requested to be cosigned by Sinavsky, A. MD, CD.

Cosign documentation will be displayed on the following page.

**Bureau of Prisons  
Health Services  
Cosign/Review**

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Inmate Name:	WILLIAMS, WALTER LEE	Reg #:	65562-112
Date of Birth:	11/03/1948	Race:	WHITE
Encounter Date:	01/28/2014 21:24	Facility:	LOS

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**Cosigned by Sinavsky, A. MD, CD on 01/30/2014 09:20.**

**Bureau of Prisons  
Health Services  
Clinical Encounter**

Inmate Name: WILLIAMS, WALTER LEE  
Date of Birth: 11/03/1948  
Encounter Date: 01/29/2014 10:54

Sex: M Race: WHITE  
Provider: Buckingham, M. PA-C

Reg #: 65562-112  
Facility: LOS  
Unit: E06

Sick Call/Triage encounter performed at Health Services.

**SUBJECTIVE:**

**COMPLAINT 1** Provider: Buckingham, M. PA-C

**Chief Complaint:** Pain

**Subjective:** fall on unit last night, pt complains of Left hip pain s/p fall. Will do x-ray and exam to determine need for specialized/emergency treatment. Pt is unable to stand, weight bear or ambulate.

**Pain Location:** Hip-Left

**Pain Scale:** 10

**Pain Qualities:** Deep | Shooting | Sharp | Unbearable | Throbbing | Stabbing

**History of Trauma:** Yes

**When:** 1/28/2014

**Injury:** to L hip

**Mechanism:** slip and fall

**Onset:** 12-24 hours

**Duration:** 12-24 Hours

**Exacerbating Factors:** attempting to move, ambulate or weight bear on L side

**Relieving Factors:** not moving

**Comments:**

**OBJECTIVE:**

**Temperature:**

<u>Date</u>	<u>Time</u>	<u>Fahrenheit</u>	<u>Celsius</u>	<u>Location</u>	<u>Provider</u>
01/29/2014	12:54 LOS	98.7	37.1		Buckingham, M. PA-C

**Pulse:**

<u>Date</u>	<u>Time</u>	<u>Rate Per Minute</u>	<u>Location</u>	<u>Rhythm</u>	<u>Provider</u>
01/29/2014	12:54 LOS	79			Buckingham, M. PA-C

**Respirations:**

<u>Date</u>	<u>Time</u>	<u>Rate Per Minute</u>	<u>Provider</u>
01/29/2014	12:54 LOS	20	Buckingham, M. PA-C

**Blood Pressure:**

<u>Date</u>	<u>Time</u>	<u>Value</u>	<u>Location</u>	<u>Position</u>	<u>Cuff Size</u>	<u>Provider</u>
01/29/2014	12:54 LOS	129/73	Left Arm	Lying	Adult-regular	Buckingham, M. PA-C

**SaO2:**

<u>Date</u>	<u>Time</u>	<u>Value(%)</u>	<u>Air</u>	<u>Provider</u>
01/29/2014	12:54 LOS	99		Buckingham, M. PA-C

**Exam:**

**Musculoskeletal**

**Hip**

Yes: Neurovascular Intact, Joint Deformity, Malalignment, Swelling, Tenderness, Decreased Range of Active Motion, Decreased Range of Passive Motion, Trauma

No: Normal Exam, Full Range of Motion, Normal Bony Landmarks, Symmetric, Normal Active ROM,

Inmate Name: WILLIAMS, WALTER LEE  
 Date of Birth: 11/03/1948  
 Encounter Date: 01/29/2014 10:54

Sex: M Race: WHITE  
 Provider: Buckingham, M. PA-C

Reg #: 65562-112  
 Facility: LOS  
 Unit: E06

**Exam:**

Normal Passive ROM

**ASSESSMENT:**

Back, contusion, 922.31 - Current, Temporary/Acute, Initial

Hip, fracture, closed, 820.8 - Current, Temporary/Acute, Initial

**PLAN:**

**New Medication Orders:**

<u>Rx#</u>	<u>Medication</u>	<u>Order Date</u>	<u>Prescriber Order</u>
	Ketorolac Tromethamine Inj 15 MG/ML	01/29/2014 10:54	60 mg Intramuscularly Deltoid, Left one time x 1 day(s) Pill Line Only

**Indication:** Hip, fracture, closed

**Start Now:** Yes

**Night Stock Rx#:**

**Source:** Pyxis

**Admin Method:** Pill Line

**Stop Date:** 01/30/2014 10:53

**MAR Label:** 60 mg Intramuscularly Deltoid, Left one time x 1 day(s) Pill Line Only

**One Time Dose Given:** Yes

**New Radiology Request Orders:**

<u>Details</u>	<u>Frequency</u>	<u>End Date</u>	<u>Due Date</u>	<u>Priority</u>
General Radiology-Spine / Lumbar-3 view AP/Lat/Spt	One Time		01/29/2014	Today

**Specific reason(s) for request (Complaints and findings):**

fall injuring back yesterday. R/o fracture

**Disposition:**

Transfer to Local Hospital

**Other:**

Pt has complex L hip fracture at the head of the L femur. X-rays discussed with Dr. Toh. Pt will be sent to local hospital for evaluation and treatment today.

**Patient Education Topics:**

<u>Date Initiated</u>	<u>Format</u>	<u>Handout/Topic</u>	<u>Provider</u>	<u>Outcome</u>
01/29/2014	Counseling	Diagnosis	Buckingham, M.	Verbalizes Understanding

Inmate Name: WILLIAMS, WALTER LEE

Date of Birth: 11/03/1948

Encounter Date: 01/29/2014 10:54

Sex: M Race: WHITE

Provider: Buckingham, M. PA-C

Reg #: 65562-112

Facility: LOS

Unit: E06

Copay Required: No

Cosign Required: Yes

Telephone/Verbal Order: No

Completed by Buckingham, M. PA-C on 01/29/2014 13:01

Requested to be cosigned by Toh, R. MD.

Cosign documentation will be displayed on the following page.

**Bureau of Prisons  
Health Services  
Cosign/Review**

---

Inmate Name:	WILLIAMS, WALTER LEE	Reg #:	65562-112
Date of Birth:	11/03/1948	Race:	WHITE
Encounter Date:	01/29/2014 10:54	Facility:	LOS

---

**Cosigned by Toh, R. MD on 01/30/2014 06:07.**

**Bureau of Prisons  
Health Services  
Clinical Encounter - Administrative Note**

Inmate Name:	WILLIAMS, WALTER LEE	Reg #:	65562-112
Date of Birth:	11/03/1948	Sex:	M
Note Date:	01/29/2014 11:53	Race:	WHITE
		Provider:	Toh, R. MD
		Facility:	LOS
		Unit:	E06

Admin Note encounter performed at Health Services.

**Administrative Notes:**

**ADMINISTRATIVE NOTE 1** Provider: Toh, R. MD

FOR DIRECT ADMIT TO WHITE MEMORIAL MEDICAL CENTER MED SURG 4 NORTH RM 4507 UNDER THE SERVICE OF DR. ABOY BUT DR. BANSAL JR. WILL TAKE CARE OF PATIENT AS DR. ABOY WILL BE OUT OF TOWN FROM NOON TODAY UNTIL SUNDAY.

REASON FOR DIRECT ADMIT: ACUTE LEFT NECK OF FEMUR FRACTURE DUE TO FALL INJURY LAST NIGHT WHEN HE SLIPPED ON THE WET FLOOR BY WET READING OF LEFT HIP X-RAY.

**New Consultation Requests:**

<u>Consultation/Procedure</u>	<u>Due Date</u>	<u>Priority</u>	<u>Translator</u>	<u>Language</u>
Internal Medicine	01/29/2014		No	

**Reason for Request:**

FOR DIRECT ADMIT TO WHITE MEMORIAL MEDICAL CENTER MED SURG, 4 NORTH, RM 4507, ARRANGED BY BED NURSING SUPERVISOR, KRIS, UNDER THE SERVICE OF DR. ABOY BUT DR. BANSAL JR IS COVERING FOR DR. ABOY SINCE THE LATTER WILL BE OUT OF TOWN FROM NOON TODAY UNTIL SUNDAY FOR THIS 66 Y/O MALE WITH ACUTE LEFT FEMUR (HIP) NECK FRACTURE DUE TO FALL ON SLIPPERY WET FLOOR LAST NIGHT WITH INABILITY TO MOVE LEFT LOWER EXTREMITY

**Provisional Diagnosis:**

ACUTE LEFT HIP FRACTURE (NECK OF FEMUR) SECONDARY TO FALL ON WET SLIPPERY FLOOR

**Additional Records Required for Consultation:**

Complete Record

Copay Required: No

Cosign Required: No

Telephone/Verbal Order: No

Completed by Toh, R. MD on 01/29/2014 12:08

**Bureau of Prisons  
Health Services  
Clinical Encounter - Administrative Note**

Inmate Name:	WILLIAMS, WALTER LEE	Reg #:	65562-112
Date of Birth:	11/03/1948	Sex:	M
Note Date:	01/29/2014 11:27	Race:	WHITE
		Provider:	Toh, R. MD
		Facility:	LOS
		Unit:	E06

Procedure encounter performed at Health Services.

**Administrative Notes:**

**ADMINISTRATIVE NOTE 1**      **Provider:** Toh, R. MD  
WILL ADD LEFT HIP X-RAY TO EVALUATE FOR FALL INJURY

**New Radiology Request Orders:**

<b>Details</b>	<b>Frequency</b>	<b>End Date</b>	<b>Due Date</b>	<b>Priority</b>
General Radiology-Hip-3 View AP/Lat/Obl [Left], General Radiology-Sacrum -	One Time		01/29/2014	Today
Coccyx-General				

**Specific reason(s) for request (Complaints and findings):**

PLEASE EVALUATE LEFT HIP FOR POSSIBLE FRACTURE FOR THIS 66 Y/O MALE WHO SAID HE SLIPPED AND FELL ON HIS LEFT HIP LAST NIGHT AT 8 PM AND COULD NOT LIFT HIS LEFT LOWER EXTREMITY; ALSO EVALUATE LUMBO-SACRAL-COCCYX

**Copay Required:** No

**Cosign Required:** No

**Telephone/Verbal Order:** No

Completed by Toh, R. MD on 01/29/2014 11:31

# DIANAssociates

PRIME : EMTEC  
UNIVERSITY OF MARYLAND  
RADIOLOGY REPORT

**PATIENT NAME:** WILLIAMS WALTER LEE  
**DATE OF BIRTH:** 19481103  
**PATIENT NUMBER:** 65562-112  
**REF. PHYSICIAN:** TOH  
**INSTITUTION NAME:** MDC Los Angeles  
**EXAM DATE:** 2014/01/29 15:04  
**OBSERVATION DATE:** 2014/01/30 11:10  
**EXAM TYPE:** S/P FALL. R/O LEFT HIP FRACTURE. HIP  
**READING RADIOLOGIST:** Thu Nguyen , MD

**HISTORY and STUDY COMMENTS**

S/P FALL. R/O LEFT HIP FRACTURE. Hip-joint

**FINDINGS AND CONCLUSION**

Abnormal. Only 1 view. Acute, comminuted, displaced left femoral intertrochanteric fx.

Findings and Conclusion ----- Abnormal. Only 1 view. Acute, comminuted, displaced left femoral intertrochanteric fx.

1/30/14

MR PAT WAS  
ADMITTED TO WMC  
HOSPITAL ON 1/29/14

A. SINAISKY, M.D.  
CLINICAL DIRECTOR  
MDC-LOS ANGELES

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EXHIBIT 7

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Statement of Inmate Michael Peterson

TRULINCS 65562112 - WILLIAMS, WALTER LEE - Unit: LOS-E-S

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FROM: 65562112

TO: Burns, Marshall; Dobbs, William; Fernandez, Manuel; Gits, Christina; Williams, Opal C

SUBJECT: witness Peterson

DATE: 04/09/2014 06:01:26 PM

This is my witness statement regarding the injury of Walter Williams, on January 28, 2014. At about 8:15 p.m., I came up to my room in 5 South at Los Angeles Metropolitan Detention Center. My cellmate Walter Williams was just leaving the room when I was coming in. Soon after, the guard locked the door and I was concerned that Walter had not returned. I was looking out the window of the door, trying to see where Walter was. There was a commotion, and I heard someone scream. I recognized it was Walter's voice calling for help. Then I saw staff coming up the stairs. I could not see what was going on, but I could hear what was being said. Walter screamed in pain, and then I heard him say: "Stop! That hurts!" Then he yelled this statement again.

After that, C.O. Torres unlocked my cell door. A short man I did not know asked my name. I answered, "Mike." He looked at me with irritation and said, "Your last name!" Then he arrogantly said, "I'm a Lieutenant. Address me as such." Then he asked me which bunk was mine. I told him the upper one. He ordered me to get into my bunk, and stay there. After I climbed up, they wheeled a gurney with Walter up to the door. The officer told Walter to get off, and go to his bunk. Walter said he was in too much pain to move.

A nurse in a blue medical uniform said to Walter that he had checked his leg out and moved it through all its motions. He said, "It's not broken. You just have a bruise." It looked to me like they were trying to push Walter off the gurney. Walter said again that he could not walk, and asked to be taken to a hospital. The Lieutenant then said that Walter refused medical attention. Walter replied sharply, "No, I did not refuse. That's ridiculous."

When Walter could not walk, the lieutenant said to me, "I changed my mind. You get down and help him in." I came over and put my arm around Walter and tried to move him. He was crying in pain. I felt bad because it was so painful for him, and I knew he should not be forced to walk. The guards did not help at all.

Once I got Walter into his bed, with great difficulty, I turned and said to them: "I think he is hurt very bad." The lieutenant replied to me: "He's full of shit." I could not believe he was so callous, and so devoid of empathy for another person. I looked at Mr. Torres, who is a good man but he gave a shrug like he had no power to do anything against the word of the nurse and the officer. The door was locked, and they left.

I felt great anxiety as I tried to fall asleep. I heard Walter in the bed below me, still crying in pain every time he tried to move. When I woke up the next morning, he was still in exactly the same position I put him in the night before. During the night he had tried to use some plastic bowls to urinate in, and he had spilled one of them on himself. It was obvious he was still in pain. He looked like he had not slept all night. As the guard opened the door, Walter begged for a doctor. He looked horrible.

After I walked downstairs to eat breakfast, I told the C.O. (I think his name was De La Hoyas), that my cellmate was badly hurt, in severe pain, and had spilled urine on himself because he could not move. He responded sarcastically: "So, clean him up!" Then he went back to what he was doing. I was dumbfounded that he did not call the doctor. No staff member seemed to be doing anything at all to help Walter. When I came back to the room, bringing some dry cereal for Walter to eat, some other inmates were trying to clean Walter. I told them what the C.O. said.

For the next several hours, Walter lay in exactly the same position. We inmates felt powerless to do anything. Then at lunchtime, I asked the C.O. if I could take a lunch tray up to the room for Walter. He said, "Hell no. If he wants it, he can come down and get it."

Walter had to lie there with no attention and no food. About noon a nurse came with a wheelchair. He said he would help Walter walk down the stairs to the wheelchair, but Walter still could not even move without great pain. The nurse said, "Then there is nothing we can do." I thought that was ridiculous. About an hour later, other staff showed up with a stretcher. I saw them carry Walter out. We inmates said, "Finally!" Later, when I asked the same C.O. if Walter broke his hip, he replied "Something like that." He sounded irritated, more concerned about his own self-interest than with Walter's well-being. Even after he knew that Walter was seriously injured, he did not express the least care. That typified this C.O.'s entire attitude the whole day. The treatment Walter received was gross negligence, without a doubt.

Signed on April 9, 2014.



Mike Peterson

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EXHIBIT 8

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Statement of Inmate Joel Dreyer, M.D.

TRULINCS 65562112 - WILLIAMS, WALTER LEE - Unit: LOS-E-S

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FROM: 65562112

TO: Burns, Marshall; Dobbs, William; Faderman, Lillian; Fernandez, Manuel; Gits, Christina; Williams, Opal C  
SUBJECT: witness Dreyer

DATE: 03/31/2014 05:53:07 PM

When I was standing in my room 546, on the evening of January 28, 2014, with the door open, I saw Walter Williams walking toward his room, which was next door to mine. I saw him fall, and as he fell he yelled "Oh, my God." I came out of my room, as did some other inmates who were concerned about him. Walter's face was contorted, and he screamed "I'm in pain" three times.

I said to him, "I hope you didn't break something." In a short time, a couple guards came up. I remember saying to them: "He might have a broken hip. Take him to a hospital." A short dark-haired guard came up. I said to him: "Let me take a look, I am a doctor. I'm a licensed M.D." \*

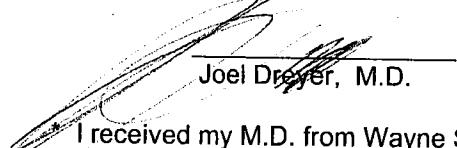
The man replied to me: "No, you're an inmate."

I did not respond to his insult, but I repeated to the other guards: "Make sure to take him to a hospital. He could have a broken bone. He is in severe pain." None of them responded; they all ignored me.

I was worried about Walter as I watched them cart him past my door to his room, on a long stretcher. I remember saying to my roommate: "I hope they take him to the hospital right away." I felt sure he had a serious injury. That night I heard Walter screaming in pain, and I could not believe they had left him in his room. Just like I predicted and told them, I later learned he did in fact have three fractures.

About 10 a.m. the next day, I saw Walter still in his room. He was still yelling in pain. They did not come to get him, in my best recollection, until sometime after 1 p.m. I saw them haul him out on a stretcher.

This is my testimony as a witness, signed March 31, 2014.

  
Joel Dreyer, M.D.

I received my M.D. from Wayne State College of Medicine, in Detroit, did my internship at Sinai Hospital in Detroit, and had another four years of residency in forensic medicine and psychiatry.

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EXHIBIT 9

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Statement of Inmate Donald Goff

TRULINCS 65562112 - WILLIAMS, WALTER LEE - Unit: LOS-E-S

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FROM: 65562112

TO: Burns, Marshall; Dobbs, William; Faderman, Lillian; Fernandez, Manuel; Gits, Christina; Williams, Opal C  
SUBJECT: witness Goff

DATE: 03/29/2014 06:36:41 PM

This is my witness statement to the injury of Walter Williams. On January 28, 2014, just before evening lockdown, I was at the door of my room. I saw Walter Williams immediately after he fell, just several feet from my door. He was screaming and lying on the floor. C.O. Torres yelled for everyone to go to their room, so he could help Williams. He was trying to help Williams. Several officers came with a gurney. They moved Williams onto the gurney, as he screamed in extreme pain. They said that Williams was OK, and he should be put into his room. Nurse Saulibio said there was nothing wrong with Williams. Williams said the pain was too great, and he called for a doctor. He wanted more help. Inmate Joel Dryer, who is an M.D., yelled that it looked like Williams' hip was broken, and they should take him to a hospital. But the officers ignored him. At no time did Williams refuse medical treatment. On the contrary, he was screaming for help. But they took the gurney to Williams' cell and made him go inside. The guards standing around, near my door, said "He's alright, he'll be OK."

The next morning, I was disturbed to find that Williams was still in his cell. I have never in my life seen anyone treated with so much disregard as they treated Williams. If not criminal, it verges on it. That day Williams was still lying in his cell, immobile, but the C.O. on duty told his cellmate that if Williams wanted to eat he must come downstairs. Williams was still lying there until after lunch, when officers finally came to get him. I heard him scream as they put him into the gurney. I saw them take him away. It was obvious Williams was in great pain, and could not walk. The bad treatment Williams received was despicable.

This is my statement, signed this 29th day of march, 2014.

Donald Goff



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EXHIBIT 10

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Statement of Inmate Romie Tucker

TRULINCS 65562112 - WILLIAMS, WALTER LEE - Unit: LOS-E-S

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FROM: 65562112

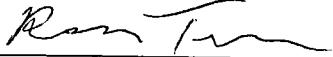
TO: Burns, Marshall; Dobbs, William; Faderman, Lillian; Fernandez, Manuel; Gits, Christina; Williams, Opal C  
SUBJECT: witness Tucker

DATE: 03/29/2014 08:55:39 AM

About 8 o'clock on the evening of January 28, 2014, I saw Walter Williams walking upstairs in 5 South at Los Angeles Metropolitan Detention Center, as he slipped and fell on his left side. Because I live right there, I saw there was water on the floor, and no cones saying "Wet Floor." I walked carefully around the water. But when Williams came up he evidently did not see the water, and he fell hard and hollered. He continued to holler in pain for about ten minutes. I saw Officer Torres carefully comforting him by putting a pillow under his head. After about ten minutes nurse Saulibio arrived. Before he even inspected Williams he ordered: "Get up!" But Williams could not move. He bent over Williams and I heard him say, "He's alright," even though Williams was screaming in pain as Saulibio moved his leg back and forth. I dont know why he did that. I never heard Williams say anything about refusing medical treatment. He was screaming loudly in pain. The officers discussed among themselves what to do, and after about twenty minutes they moved Williams onto a stretcher. I was shocked that they did not immediately take him out to the hospital. We inmates realized Williams was seriously hurt. Nobody screams like that if faking it.

The next morning I went to Williams' room and he was still there, with no medical attention. I saw him lying in his bunk, with about five plastic bowls full of urine on the floor. He said he had not been able to go to the toilet during the night. I told my cellmate Frisco to come in and empty them for him, and he did. I had to go see my lawyer, so I left. A lot of inmates felt very sad, because we all realized Williams was seriously injured. He was gone in the hospital for about two months, and when he returned we heard that his hip had been broken in three places. What they did in denying him medical treatment for so long, is terrible.

This is my statement, signed this 28th day of March, 2014



Romie Tucker  
home telephone 562-230-9640

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EXHIBIT 11

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Statement of Inmate Phillip R. Roland

TRULINCS 65562112 - WILLIAMS, WALTER LEE - Unit: LOS-E-S

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FROM: 65562112

TO: Burns, Marshall; Dobbs, William; Faderman, Lillian; Fernandez, Manuel; Gits, Christina; Williams, Opal C  
SUBJECT: witness Roland

DATE: 03/30/2014 05:54:27 PM

Statement Regarding Walter Williams

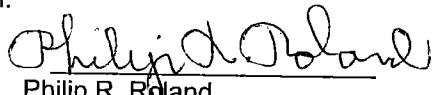
After 8:00pm on January 28, 2014, I heard loud cries of agony coming from the center of MDC 5-South's B Range, almost over my head. I immediately left my cell to see C.O. Torres running up the stairs to the location of the incident. A few inmates had gathered at the scene. C.O. Torres told everyone to go to their cells. I did so, while the cries of agony continued. From the sound of the voice, I determined that Walter Williams was on the floor painfully moaning.

A few minutes later, I left my cell and walked out several feet. I saw several individuals in non-inmate uniforms, surrounding Walter. I think they were dark blue medical staff uniforms. I went back to my cell and heard more of Walter's cries and moans and several unknown voices. Walter made it quite clear that he wanted a doctor and did not want to be moved to his cell. Someone said, "Nothing is broken; it's OK." Apparently, then, the group attempted to move Walter to his cell. His cries got even louder during the move.

At no time did anyone ask Walter if he desired medical treatment. I could hear just about everything that was said, especially Walter's voice. At no time did Walter refuse medical treatment. In fact, it was quite the opposite. He pleaded to be sent to the hospital and kept asking everyone to call for a doctor.

At this point I closed the door of my cell and did my best to tune all of this out. The next morning at approximately 6:30am, we were informed that Walter was still in his cell.

Signed this 30th day of March, 2014.

  
Philip R. Roland  
inmate 66594-112

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EXHIBIT 12

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Statement of Inmate John Boone

TRULINCS 65562112 - WILLIAMS, WALTER LEE - Unit: LOS-E-S

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FROM: 65562112

TO: Burns, Marshall; Dobbs, William; Fernandez, Manuel; Gits, Christina; Williams, Opal C  
SUBJECT: witness Boone

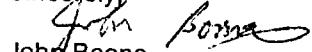
DATE: 04/02/2014 05:40:21 PM

To Whom It May Concern:

My name is John Boone, inmate # 17808-111. On January 28, 2014, at approximately 8 p.m. on our 5-South floor, I witnessed Walter Williams on the ground, yelling in extreme pain. The screaming was so loud that the entire floor had to hear him. I did not know the extent of his injury but it was clear something was gravely wrong with his health.

I witnessed several B.O.P. staff members observing Mr. Williams, until a large man wearing a dark blue medical uniform came and grabbed Mr. Williams by his lower extremity. Mr. Williams screamed loudly. He continued to tell the B.O.P. staff he was in severe pain as he lay there. The B.O.P. staff, using a stretcher, carried Mr. Williams back to his cell. You could hear him screaming the entire way as they placed his body in the cell and locked the door behind him. I could periodically hear Mr. Williams yelling in pain all night long. No one came to take him for medical treatment until later the next day.

Sincerely,



John Boone  
April 2, 2014

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\*\*\* SEALED DOCUMENT \*\*\*

Exhibit 13

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\*\*\* SEALED DOCUMENT \*\*\*

Physical Therapy Clinical History,  
Problems, and Medications Prescribed

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EXHIBIT 14

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Hospital Physical Therapy Report

310-555-6666

06:51:50 p.m. 02-13-2014 65562-112 578

**Adventist Health****WHITE MEMORIAL MEDICAL CENTER**  
1720 CESAR E CHAVEZ AVE, Los Angeles, CA 90033, (323) 268-5000

514927

Admit  
Date/Time:  
Discharge  
Date/Time:

2/05/2014 14:07

**PHYSICIAN FACE SHEET**

<b>Patient Name and Address</b>					Phone 817 477-0400	Account Number 514927	Medical Record No. 130-25-39
					Other Phone #: 5863	F/C SNF	Type Room F 3156-02
					Social Security Number 000-00-0001	Mode of Arrival TF 4N ORT	Accom. 2
Birth Date 11/03/1948	Age 065Y	Sex M	Marital Status S	Religion N/A	Drivers License No. NA	Primary Language Spoken English	Written Language
Birth Place Previous/Maiden Name					Spouse		Race

<b>GUARANTOR</b>	Name METROPOLITAN, DETENTION C	Occupation METRO	Relation OTHER	Birth Date 1/01/1888	Phone 213 485-0439
Address	535 N ALAMEDA STREET	LOS ANGELES	CA 90063	Social Security Number xxx-xx-0001	
Guarantor Employer Name and Address	METROPOLITAN DETENTION CENTER	535 N. ALAMEDA ST	LOS ANGELES, CA 90012	213 485-0439	

Relative/Friend	Address	Relation
Relative/Friend	Address	Phone
		Relation
		Phone

Doctor Information	ATT ABBOY, RAMADAS ADM ABBOY, RAMADAS REF	Dr. Phone # (323) 263-9779 (323) 263-9779 (000)
--------------------	---	--

Initial Diagnosis Impression/Statement of Illness/Injury	POST OPERATIVE DAY 4 STATUS POST LEFT HIP PINNING
--	---

ACCIDENT INFORMATION		Date:	Type:	Service related to accident:
Location:	Description:			

Patient Employer INMATE	Phone:	LMP
	Occupation: UNEMPLOYED	
	Retirement Date: / /	

<b>CARRIER 1</b>	INTEGRATED MED SOLUTIONS CLAIMS DEPARTMENT 1485 HERITAGE PARKWAY MANSFIELD, TX 76063	Phone: (817) 477-0400	Subscriber Name WILLIAMS, WALTER
Subscriber ID (Cert, SSN, or HIC number) BK#65562-112	Group Name	Group Number	Relation SELF
			Subscriber Birth Date 11/03/48
			Pre-authorization # PENDING

<b>CARRIER 2</b>	Phone:	Subscriber Name
		Relation
Subscriber ID (Cert, SSN, or HIC number)	Group Name	Subscriber Birth Date
		Pre-authorization #

<b>CARRIER 3</b>	Carrier 3 Name / Subscriber / Relation / Policy # / Group #	Phone:
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Remarks: NOT FOR GOVERNMENT CONVENIENCE PER LUZ IN SNF		
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Transferring Facility:
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Physht12/12 bpt

Source D	Route 2	Requested By PEREZLE
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1302539-514927

Dr. Toh, Physician  
MDC LOS ANGELES  
Metropolitan Detention Center  
535 North Alameda St.  
Los Angeles CA. 90012

Date of Admit 2/5/14 Date of Eval. 2/6/14 Ordering M.D.: Abboy Insurance: MDC  
 Diagnosis: S/p (1) hip pinning; ↓ ADLs/mobility Precautions: fall risk, skin risk, ar. PWB  
ar. PWB  
 HPI: Pt. is 65 y.o. Caucasian male who sustained 3-part fx. to (1) hip 2° fall  
backwards. (1) hip pinning on 1/31 by Dr. Galloni.  
 PMH: HIV (1), neuropathy, OERD

PLF: Gait: (1) 5 ADL ADLS: (1) diff. C LB ADLS Lives With: nr  
 Home: Apt. Condo House Stairs: 5th floor Rail: Rt. Lt. Other: DME (1), shower stool (1)

\*\*See MDS Specific tests for ROM/Strength

ROM 0 = no limitations	Neck	ROM	STR	Comments (tone, spasticity, degrees, etc)
1 = limitation on one side	Arm (shoulder/elbow)	0	0	WFL (1) UEC
2 = limitation on both sides	Hand (wrist/fingers)	0	0	
STRENGTH 0 = no loss	Leg (hip/knee)	1	0	(1) hip ✓ 80° J° pain
1 = partial loss	Foot (ankle/toes)	0	0	(1) hip ✓ 1/5 (1) knee / 1/6
2 = full loss	Other limitation or loss	0	0	(1) knee ✓ 1/10, (1) hip 1/20 abd 5/5

#### PHYSICAL FUNCTIONING

##### MDS Self Performance Key (A)

		Support Provided Key (B)	
0	Independent	No help or oversight	0 No set up or physical help
1	Supervised	Oversight/encouragement or cueing provided	1 Set up help only
2	Limited Assist	Physical help in guided maneuvering of limbs or other non-weight bearing help (contact guard assist)	2 One person physical assist
3	Extensive Assist	Performs part of activity with help for weight bearing support or full staff performance in part of activity; Quality (min. mod. or max.)	3 Two + Person Assist
4	Total Dependence	Full staff performance of activity	8 Did not occur
8	Did not occur	NT	

Bed Mobility	How resident moves to/from lying position, turns side to side, and positions body while in bed.	SELF/SUPP		COMMENTS
		3	2	
Transfer	How resident moves between surfaces - to/from bed, chair, wheelchair, standing position (EXCLUDE to/from bath and toilet).	3	3	mod (1) + 2 abd
Walk In Room	How resident walks between locations in his/her room	3	3	mod (1) + 2 abd
Walk in Corridor	How resident walks in corridor ON UNIT	3	3	Gait: amb (1)
Locomotion on Unit	How resident moves between locations in his/her room and adjacent corridor on same floor. If in wheelchair, self-sufficiency once in chair.	8	8	mod (1) + 2 abd, may
Locomotion Off Unit	How resident moves to and returns from off unit locations (e.g. dining, activities or treatment rooms). If facility has only one floor, how resident moves to/from distant areas on the floor. If in wheelchair, self-sufficiency once in chair.	8	8	mod (1) + 2 abd, may
Dressing	How resident puts on, fastens, and takes off all items of street clothing, including donning/doffing prosthesis.	3	2	mod (1) + 2 abd
Eating	How resident eats and drinks regardless of skill includes intake of nourishment by other means (e.g. tube feeding, parenteral feeding).	3	2	mod (1) + 2 abd
Toilet Use	How resident uses the toilet room (or commode, bedpan, urinal) transfers on/off toilet, cleanses, changes pad, managed ostomy or catheter, adjust clothes.	0	1	s/u

White Memorial Medical Center Los Angeles, CA

#### INTERDISCIPLINARY PT/OT EVALUATION SNF SNF DEPARTMENT



\*252\*

Page 1 of 2

WILLIAMS, WALTER LEE  
 M 065Y 11/03/1948 ATT 1024 ABBOY, RAMADAS  
 ACCT: 514927 REF 3166-02  
 MR # 1302539 ADM 1024 ABBOY, RAMADAS  
 ADMIT: 2/05/2014

3166-02

REF

SNF E

5863

9621863 (6/11)

Dr. Toh, Physician  
 MDC LOS ANGELES  
 Metropolitan Detention Center  
 535 North Alameda St.  
 Los Angeles CA. 90012

**White Memorial  
Medical Center**

**—Adventist  
Health**

For WMMC use only

WILLIAMS, WALTER LEE  
M 085Y 11/03/1948 3166-02  
ACCT: 614827 ATT 1024 ABBY, RAMADAS  
MR #: 1302539 ADM 1024 ABBY, RAMADAS  
ADMIT: 2/05/2014 REF  
Barcode

SNF  
5863

**Inmate Status Report To: IMS**

Attention: Ashley Teigland Fax#: fax 817-842-9058 Phone#: phone - 817-842-2831

Case Manager: PAULITA T BOYLES Fax# (323)265-5038 Phone#: (323)268-5700 x 221

**WHITE MEMORIAL MEDICAL CENTER**

Patient Name: WILLIAMS WALTER LEE Registered #: \_\_\_\_\_

Date(s) of review: 02/07/14

Hospital Unit Patient Resides in Today:  Med/Surg  ICU  CCU  Telemetry  SNF  
 Swing Bed  Rehab  LTAC  Psych  Other: \_\_\_\_\_

**Working Diagnoses/PMH:** Left hip pinning 10RIF

**Medications:** Acyclovir 400 mg 1 tab po BID, ViTB-12 100 mcg. po q morning; Seneca 2 tabs po HS, Clidura 4 mg po q PM, Truvanda 1 tab po daily, Candesourenox 30 ~~300 mg~~, Neurotin 600 mg 2 tabs q PM, Pravafac 2 tabs po BID, Fanculifase 1 cap BID prn

**Clinical, current progress:** Pravafac 20 mg tabs q PM, Regugs 4 mg po HS  
please see attached

Physical therapy reports

**Action and Plan of Care:**

Continue current medical care mgmt. Wound dressing daily

**Diagnostic Procedure(s) (Performed):**

**Diagnostic Procedure(s) (Pending):**

**Discharge Plan(s):**

Return to MDC

**Medications at discharge:**

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Dr. Toh, Physician  
MDC LOS ANGELES

Metropolitan Detention Center  
535 North Alameda St.  
Los Angeles CA. 90012

310-555-6666

06:52:33 p.m. 02-13-2014 65562-112 4/8

PT Treatment Freq/Duration: \_\_\_\_\_

OT Treatment Freq/Duration: \_\_\_\_\_

ST Treatment Freq/Duration: \_\_\_\_\_

DME Needs:  3-in-1 commode  W/C with elev/nom leg rests  cushion seat belt  FWW with \_\_\_" non/switch wheels  
 Grab bar 18"720"  shower chair with/out back rest  tub transfer bench  other: \_\_\_\_\_

Date Ordered: \_\_\_\_\_ Ordering MD: \_\_\_\_\_

310-555-6666

WILLIAMS, WALTER LEE 3105-02  
M 065Y 11/03/1948 ATT 1024 AEROY, RAMADAS  
ACT: 514827 MR # 1302539 ADR 1024 AEROY, RAMADAS  
ADMIT: 2052014 REP SNF F  
SHEEDS

Plan Day 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31

Week Day

PT Individual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	
Group	10 10	10 10																											
Concurrent	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	
PT Total	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	
OT Individual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	
Group	10 10	10 10																											
Concurrent	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	
Options	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	
SLP	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	
Total Plan	110 110	110 110																											
Total Actual	110 110	110 110																											
7-Day Plan																													
7-Day Total																													
RUGS from Plan																													
RUGS from Actual																													

COT Alert (place X)  
EOZ Alert (place X)  
Guide: Assessment Days = Yellow Highlight Grace Days = Green Highlight ARD = Red Box Outline COT & EOZ Alert = Red X

310-555-6666

06:54:06 p.m. 02-13-2014 65562-112 48

Date	Initials	Co-sign	Total Time	Evaluation	Funct. Mob.	Ther. Ex.	Gait	Pt. Ed.	Dx: <i>left foot drop 1/p (L) hip pain 2/p</i>	Precautions: <i>fall, skin 1/p</i>
2/6/14	SD		60	✓	30	15	15		(PWB) WBAT TTWB NWB	ICE
2/7/14	SP		60		30	15	15			
2/10/14	SD		60		30	30				
2/19/14	SP		30		90	15	15			

Self Performance Key (A)		Support Provided Key (B)	Function Level (C)
0	Independent	0	No setup or physical help
1	Supervised	1	Set up, help only
2	Limited Assist	2	One person physical assist
3	Extensive Assist	3	Two + person assist
4	Total Dependence	8	Did not occur
8	Did not occur		Activity did not occur during session

(Min) Minimal Assist - Pt performs >75% (Mod) Moderate Assist - Pt performs 25-75% (Max) Maximal Assist - Pt performs <25%  
 FWW - Front wheel walker PWU - Pick up walker SBQC - Small based quad cane LBQC - Large based quad cane SPC - Single point cane  
 PWB - Partial WI bearing WBAT - WI bearing as tolerated TTWB - Toe touch wt bearing NWB - Non wt bearing

## DAILY FUNCTIONAL STATUS

Signature

Initials Signature

Initials      Signature

Signature

Initials Signature

( )

Initials Signature \_\_\_\_\_  
White Memorial Medical Center Inc. \_\_\_\_\_

**DAILY TREATMENT RECORD AND  
STATUS REPORT-REHAB CENTER**

WILLIAMS, WALTER LEE 3166-02  
M 085Y 11/03/1948 ATT 1024 ABBY, RAMADAS  
ACCT: 514827 ADM 1024 ABBY, RAMADAS  
MR # 1302639  
ADMIT: 2005/2014 REF:

A standard linear barcode is positioned horizontally across the page, consisting of vertical black lines of varying widths on a white background.

•384•

Page 1 of 1

9825021 (8/12)

Dr. Toh, Physician  
MDC LOS ANGELES  
Metropolitan Detention Center  
535 North Alameda St.  
Los Angeles CA. 90012



310-555-6666

06:55:30 p.m. 02-13-2014 65562-112

Date	Initials	Co-sign	Total Time	Evaluation	ADL Trng.	IADL Trng.	Ther Act/Exercise	AD Trng.	Fxnal Mod/Transfer Trng For ADL's	Safety Trng.	Family Trng.			Dx: S/p C hip pinning; LADLS Precautions: fall. PWD WBAT TTWB NWB LLF
2/10/14	ek	ek	60	30				30						
2/11/14	ek	ek	60				30	30						

## Self Performance Key (A)

## Support Provided Key (B)

## Functional Level (C)

0	Independent	0	No set up or physical help	I - Independent - safe alone
1	Supervised	1	Set up only	S - Supervised, patient requires verbal cues or SBA for safety
2	Limited Access	2	One person physical assist	SBA/CGA
3	Extensive Assist	3	Two + person assist	Min/Mod Assist
4	Total Dependence	4	Did not occur	Max/U
5	Did not occur			Activity did not occur during session

(Min) Minimal Assist - Pt performs &gt;75% (Mod) Moderate Assist - Pt performs 25-75% (Max) Maximal Assist - Pt performs &lt; 25%

## DAILY FUNCTIONAL STATUS

Date	Upper Body Dressing	Lower Body Dressing	Fxnal. Transfer (tub, toilet, bed)	Toileting	Personal hygiene & grooming	Eating	Bathing		Task Segmentation	Sit. Bal.	Stand Bal.
							UB	LB			
2/10/14	A 0	B 1	C s/u	3 2 mod	3 2 max	4 2 dep.	0 1	s/u 5	1 1 SBA		
2/11/14	S			3 2 mod	5				3 2 max	2	3

Sgt. B. L. Williams, OTS (ek.)

Signature

Initials

Signature

Initials

Signature

Initials

Signature

Initials

Signature

Initials

Signature

Initials

White Memorial Medical Center Los Angeles, CA

## DAILY TREATMENT RECORD AND STATUS REPORT

SNF DEPARTMENT



\*325\*

Page 1 of 2

9625038 (8/11)

WILLIAMS, WALTER LEE  
M 065Y 11/03/1948 ATT 1024 ABBY, RAMADAS  
ACCT: 514927 ADM 1024 ABBY, RAMADAS  
MR # 1302839  
ADMT: 2/05/2014 REP

SNF F  
6863SNF F  
6863SNF F  
6863



310-555-6666

06:51:20 p.m. 02-13-2014 65562-112

**White Memorial  
Medical Center**

**—Adventist  
Health**

For WMMC only

WILLIAMS, WALTER LEE  
1 M 085Y 11/03/1948 ATT 1024 ABBY, RAMADAS 3156-02  
2 Acct: 514927  
3 MR # 130-25-39 ADM 1024 ABBY, RAMADAS  
4 ADMT 1024 ABBY, RAMADAS PEP



SNF F  
5883

WHITE MEMORIAL MEDICAL CENTER

**Inmate Status Report To: IMS**

Attention: Ashley Telgland 394-1865 Fax#: 817-842-9058 Phone#: 817-842-2831

Case Manager: PAULITA T. BOYLE Fax# (323) 265-5038 Phone#: (323) 268-5000

x 2212

**WHITE MEMORIAL MEDICAL CENTER**

Patient Name: WILLIAMS, WALTER LEE Registered #: \_\_\_\_\_

Date(s) of review: 02/10 - 02/13/14

Hospital Unit Patient Resides in Today:  Med/Surg  ICU  CCU  Telemetry  SNF  
 Swing Bed  Rehab  LTAC  Psych  Other: \_\_\_\_\_

**Working Diagnoses/PMH:** Left hip pinning / ORIF

**Medications:** Acyclovir 400 mg po BID, Vit B 12 100 mcg po q AM, Benadac 2 tabs po q bedtime, Cardura 4 mg po q PM, Truvada 1 tab po daily, Neurontin 400 mg 2 caps po q PM, Koletra 2 tab po BID, Panciclovir 1 CR cap po qID **Clinical, current progress:** Pravachol 20 mg po q PM, Reglip 4 mg po q HS

Please see attached physical therapy report

**Action and Plan of Care:**

cont. dressing changes daily

**Diagnostic Procedure(s) (Performed):**

**Diagnostic Procedure(s) (Pending):**

**Discharge Plan(s):**

Return to WMC

3/7/2014

**Medications at discharge:**

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Dr. Ton, Physician  
MDC LOS ANGELES  
Metropolitan Detention Center  
535 North Alameda St.  
Los Angeles CA. 90012

**White Memorial  
Medical Center****—Adventist  
Health**For WHMCC use only

WILLIAMS, WALTER LEE 3156-02  
 M 065Y 11/03/1948 ATT 1024 ABBY, RAMADAS  
 1. Acct: 514927  
 2. MR # 130-25-39 ADM 1024 ABBY, RAMADAS  
 3. ADMIT: 2/05/2014 REF:  
 4. COI:   
 SNF F  
 5063  
 WHITE MEMORIAL MEDICAL CENTER

**Inmate Status Report To: IMS**

Attention: Ashley Teigland Fax#: fax - 817-842-9058 Phone#: phone - 817-842-2831

Case Manager: PAULITA T BOYLES Fax# (323)265-5038 Phone#: (323)2685700X 2212

**WHITE MEMORIAL MEDICAL CENTER**

Patient Name: WILLIAM WALTER LEE Registered #: \_\_\_\_\_

Date(s) of review: 2/17-02/21/14

Hospital Unit Patient Resides in Today:  Med/Surg  ICU  CCU  Telemetry  SNF  
 Swing Bed  Rehab  LTAC  Psych  Other: \_\_\_\_\_**Working Diagnoses/PMH:** S/P ORIF left hip pinning

Medications: Acyclovir 400 mg tab po BID, VIT. B 12 1000 mcg po q AM, Senator 2 tab po q HS, Coudura 4 mg tab po q PM, Truvada 4 tab po daily, Neurontin 600 mg &amp; 300 mg po q AM, Kaletra 2 tab po BID, Zomig 1, CR 10 mg po BID meal, Pravachol 20 mg tab po q PM

Clinical, current progress: Risperid 4 mg po (4 tabs) q HS

**Action and Plan of Care:**

Cont. dressing change daily

Cont. Physical therapy

**Diagnostic Procedure(s) (Performed):****Diagnostic Procedure(s) (Pending):****Discharge Plan(s):**

Return to MDC

**Medications at discharge:**

R 3/7/2014

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Dr. Toh, Physician

MDC LOS ANGELES

Metropolitan Detention Center

535 North Alameda St.

Los Angeles CA 90012

**White Memorial  
Medical Center**

**—Adventist  
Health**

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WILLIAMS, WALTER LEE 3156-02  
1. M 065Y 11/03/1948 ATT 1024 ABOY, RAMADAS  
ACCT: 514927 ADM 1024 ABOY, RAMADAS  
2. MR # 1302539 REP  
3. ADMIT: 2/05/2014 SNF F  
4. CC 5803



**Inmate Status Report To: IMS**

Attention: Ashley Teigland *394-1865* Fax#: fax - 817-842-9058 Phone#: phone - 817-842-2831 *477-0400*

Case Manager: PAULITA BOYLES Fax# *(323)265-5038* Phone#: *(323)268-5000*

**WHITE MEMORIAL MEDICAL CENTER**

*x2212*

Patient Name: WILLIAMS, WALTER LEE Registered #: \_\_\_\_\_

Date(s) of review: 02/24 - 02/28/14

Hospital Unit Patient Resides in Today: Med/Surg ICU CCU Telemetry SNF  
Swing Bed Rehab LTAC Psych Other: \_\_\_\_\_

**Working Diagnoses/PMH:** S/P ORIF c left hip gimping

**Medications:** Acyclovir 400 mg 1 tab po BID, Vit B12 100 mcg po q AM, Seroquel 2 tabs po qHS, Cardura 4 mg po q PM, Tramadol 1 tab po daily, Neurontin 600 mg 2 caps

**Clinical, current progress:** 2 PM, Kaletra 1 CR cap. BID meals, Phrenchel 20 mg po

**Patient progress:** 8 PM, Regisic 4 tabs 1 tab .5 HS, PRN meals: Hydrocodone 2 tabs po q 4<sup>th</sup> 4<sup>th</sup> pain, Morphine 30 mg 2 tabs po BID severe pain

**Action and Plan of Care:**

continue wound dressing daily → changed to steri-strip  
continue OT/PT

**Diagnostic Procedure(s) (Performed):**

**Diagnostic Procedure(s) (Pending):**

*W 3/7/2014*

**Discharge Plan(s):**

*Back to MDC. Patient might need wheelchair upon discharge.*

**Medications at discharge:**

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